

In the Claims:

Please amend the claims as follows:

---

51. (Amended) A method for gathering a patient's data and using that data in generating a billing code, including:

providing an electronic computer to prompt an information gatherer to gather information that at least includes information relevant to calculating the billing code, said computer prompts being usable in real-time by the information gatherer interacting with a patient to help guide the information gatherer during said interaction with the patient and to remind the information gatherer regarding specific points of inquiry that may be relevant to further examination of that patient, said prompts soliciting underlying information usable for calculating a description of a medical service being provided rather than said prompts soliciting the information gatherer for the description of said medical service itself, said underlying information being independent of the description of said medical service for purposes of the eventual billing for the service;

obtaining and recording that information;

repeating said prompting, obtaining, and recording steps; and

electronically calculating a desired billing code from said gathered data.

---

55. (Amended) A method of calculating a medical billing code that complies with the requirements of the United States Health Care Financing

Administration, including:

providing an electronic computer or scannable form;

prompting an information gatherer via said electronic computer or said scannable form to gather information that at least includes information relevant to calculating the billing code, said computer prompts being usable in real-time by said information gatherer interacting with a patient to help guide said information gatherer during said interaction with the patient and to remind said information gatherer regarding specific points of inquiry that may be relevant to further examination of that patient, said prompts soliciting underlying information usable for calculating a description of the medical services being provided rather than said prompts soliciting said information gatherer for the description itself of the medical services, said underlying information being independent of the description of the medical services for purposes of the eventual billing for the services;

obtaining and recording that information into said electronic computer or said scannable form;

repeating said prompting, obtaining, and recording steps; and

electronically calculating a desired billing code from said gathered data.

57. (Amended) An integrated electronic system for conducting a medical interview of a patient and contemporaneously calculating an appropriate government billing code based on that interview, including:

electronic means for prompting an interviewer to make a series of inquiries for eliciting corresponding responses from the patient, said means optionally using at least some of the preceding responses in calculating further prompting for inquiries to make of the patient, said means being usable in real-time by the interviewer

interacting with a patient to help guide the interviewer during said interaction with the patient and to remind the interviewer regarding specific points of inquiry that may be relevant to further examination of that patient, said prompts soliciting underlying information usable for calculating a description of the medical services being provided rather than said prompts soliciting the interviewer for the description of the medical services itself, said underlying information including information independent of the description of the medical services for purposes of the eventual billing for the services;

electronic means for recording the patient's response or other information regarding the prompted inquiry; and

electronic means for calculating the government billing code based on information recorded from the medical interview.

58. (Amended) Apparatus for electronically calculating an appropriate United States Health Care Financing Administration (HCFA) billing code based on a medical examination of a patient, including:

electronic means for recording information during the medical examination, said information including at least sufficient details to support billing requirements imposed by HCFA;

electronic means for automatically determining, based upon said details, intermediate HCFA code values for sub-parts of the examination; and

electronic means for automatically determining, based upon said details, an appropriate final HCFA billing code from the intermediate HCFA code values.

59. (Amended) Electronic apparatus for use in connection with an encounter between a medical practitioner and a patient, comprising:

electronic means for prompting the medical practitioner regarding data to be obtained from the patient regarding patient care and corresponding HCFA billing codes, said data including at least sufficient details to support billing requirements imposed by HCFA, said information constituting more than just a conclusory description of the medical services;

means for storing said data from the patient;

a menu section comprising at least one of history, physical examination, and medical decision making questions, said menu section related to said means for prompting the medical practitioner;

payer mandated requirement codes;

scores based in part on results from responses to said menu section;

algorithm for linking and processing said requirement codes with said scores; and

resultant code based in part on said linked and processed requirement codes and scores.

68. (Amended) Apparatus for compiling medical data and generating claims consistent with payer mandates, comprising:

electronic means for displaying topics of inquiry for use with a patient during a patient encounter, said topics of inquiry including at least sufficient details to support billing requirements imposed by said payer mandates, said topics of inquiry